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A

LETTER

ON THE

PRACTICE OF MIDWIFERY,

Addressed to

Occasioned by, and including an Account of,

A LATE UNFORTUNATE CASE,

WITH SOME

OBSERVATIONS AND REFLECTIONS

ON

THE SUBJECT.

By JOHN BOYS,

PHYSICIAN, MAN-MIDWIFE TO THE WESTMINSTER GENERAL DISPENSARY, AND TEACHER OF MIDWIFERY IN LONDON.

Νυκίος-Αιθήριε και 'Ημέρα εξεγένονίο.

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LETTER,

&c. &c. &c.

MY DEAR SIR,

I Have frequently, when I have had the honor of conversing with you, been led to lament the many melancholy victims which I am unhappily but too often in the habit of seeing fall sacrifices to the gross and unfeeling ignorance of persons in the practice of midwifery; the annexed cases, the first a very recent one, I will beg leave to state to you, as an illustration of what I have

before said; to which I shall add a few thoughts that have in consequence occurred to me on the subject.

CASE.

Mrs. Ann D. aged 33, was taken in labour at the full period of utero-gestation, on Friday morning, September 18, 1807.

I was informed that a practitioner, far advanced in years, who had attended her in two of her former labours, was sent for. When he came, he was told her waters had broke, but as she was without much pain, he did not make any examination, but left her, with orders to be sent for should her pains increase. In the evening he was called; and on examination he found a foot in the vagina; this he brought down, and then, by bending

the knee, the other, the body followed, the head, with little, or no assistance, came easily along, and the child was born alive, and is now living.

In a short time he tried to extract the placenta, by pulling at the funis; in this attempt, however, he did not succeed; but by the force used, the funis, with a jagged portion of the placenta, about the size of an egg, was pulled away, and this was followed by such an hæmorrhage, as to make her faint.

As only part of the placenta had yielded to his endeavours to bring it down, he concluded, (as he says,) that it stuck; and as she had lost, and was losing, a considerable quantity of blood, he did not think it right to introduce his hand into the uterus, in order to bring away

the lacerated placenta, for fear of increasing the hæmorrhage and faintness, but judged it better to wait, hoping that the pains would expel it.

Having therefore stated to the patient and her friends, that the placenta stuck, and that it would be better, for fear of increasing the flooding, that the expulsion of it should be left to nature, he went away.

On Saturday morning he called again, but on the nurse informing him that things remained nearly the same as on the preceding evening, he did not conceive it necessary to see her; nor did he. Thus Saturday passed.

In the evening he paid her a visit, but as no part of the placenta had as yet made its appearance, he recommended the same mode of proceeding: however, on being informed by the nurse that she had neither made water, nor passed a stool, he replied, that if she did not make water before the next morning, she was to give her a glyster with gruel, sugar and oil. No water was made, and the nurse prepared the glyster, but was not successful in giving it. On being informed of this, when he called on Sunday morning, he directed it to be repeated in the afternoon; saying, that if the patient did not then make water, it must be drawn off. On administering the second injection, (which produced the desired effect,) the nurse observed something protruding through the os externum, which she thought was the placenta; in consequence of which, the Accoucheur was immediately sent for. When he came,

and was informed of this circumstance, he said, it must be brought away, and the womb must be cleared. He then ordered Mrs. D. to be turned on her left side, a pillow to be placed between her knees, and in this position she was supported by her sister, her niece, and the nurse: he then sat down, and after using considerable efforts, during which his patient complained of great pain, begged of him to stop, and asked him if he had not almost done; to which he made no reply, but desired the nurse to bring a pair of scissars; and on her remarking that she feared there was another child, he said, that there was a false conception, adding, you will soon see what there is. Immediately afterwards the sister observed that Mrs. D. was fainting: on this he called for hartshorn, and directing his attention more immediately to his patient, soon found that she was dead.

He might then have used the scissars, but in what manner they could not say, and desired the nurse to remove from the bed whatever she should find there, put it into a bason, and place it underneath; having, as I before observed, previously informed them that it was a false conception. He then took his leave, without examining the parts which had been separated from the body.

The next morning, Monday, Sept. 21, Mr. Newby, a very experienced and excellent practitioner in inidwifery, was sent for to inspect the body, and examine the contents of the bason, which, according

to the Accoucheur's directions, had been removed by the nurse from the bed. Struck with astonishment, horror, and surprise, at what he saw, he did me the favor to call on me, and giving an account of what he had just seen in a bason and chamber pot, he requested me to go with him and inspect it, prior to the body being opened, he having already obtained leave for that purpose (however without mentioning any particulars,) fearing that by some means or other the contents of the bason, &c. might be secreted. I accordingly accompanied him-and I must confess it was such a sight as I hope never again to see,

The parts which were in the chamber pot consisted only of the funis, with a part of the placenta attached to it, a little coagulated blood, together with some loose portions of the placenta, collected, it seems, by the nurse, with a view to discover, by adding them together, if they would form a whole, i. c. if all the placenta was come away.

In the bason were the whole uterus and most of its appendages, a considerable portion of large and small intestines, with the mesentery, the omentum, the rectum, and a large quantity of coagulated blood.

As I entirely agreed with Mr. Newby on the necessity of the body being opened, Mr. Joshua Brookes, Professor of Anatomy and Surgery, &c. &c. in Blenheim Street, was applied to, to perform the operation; which he accordingly did about seven o'clock in the evening, in the presence of the gentlemen hereafter named.

As none of these gentlemen had examined the contents of the bason, I suggested that the anatomist should first open the body, in order to ascertain what might there be wanting, and then inspect, and compare the parts, which, as I have before observed, the Accoucheur had ordered the nurse to take from the bed; and on this being done, they were found to correspond exactly.

Mr. Brookes's statement is as follows:

Monday, 21st September, 1807.

Examination of the body of Mrs. Delcroix, of Poland Street, by Joshua Brookes, Teacher of Anatomy, Member of the Royal College of Surgeons, &c. &c. the following gentlemen being present, viz. Dr. Hooper, of the Royal College of Physicians, Lecturer on the Practice of Physic and on Pharmaceutical Chemistry, and Physician to the Mary-le-bone Infirmary.

Dr. Fothergill, of the Royal College of Physicians, Physician to the Westminster General Dispensary, and to the Western Dispensary.

Dr. Boys, Physician, Man-midwife to the Westminster General Dispensary, and Teacher of Midwifery.

Mr. Williamson, Surgeon and Man-midwife.

Mr. Newby, Sen. Apothecary and Man-midwife.

Mr. Newby, Jun. ditto.

Mr Evans, Navy Surgeon and Man-

midwife, and Mr. Cooke, House Pupils with Mr. Brookes.

Mr. Clayton, Sen. a Pupil of Mr. Brookes.

Mr. Clayton, Jun. Assistant to Mr. Newby.

The dissection commenced about seven o'clock in the evening.

On opening the body, the following parts were wanting, viz.

The uterus, ovarium, and fallopian tube of the right side, with part of the vagina, and a portion of the fallopian tube on the left.

The greatest part of the rectum.

The cœcum caput coli, the appendix cæci vermiformis, and the ascending portion of the colon, with the right side of its transverse arch.

All the ilium, and inferior portion of the jejunum, measuring together more than twenty feet of the small intestines, with a part of the mesentary.

The greater part of the omentum majus, which had been torn away from the right side of the large curvature of the stomach, along with the portion of the transverse arch of the colon already mentioned.

The remaining part of the transverse arch of the colon, and a considerable portion of the ilium torn from its peritoneal covering.

The right side of the larger curvature of the stomach drawn down towards the pelvis. The cellular membrane replete with extravasated blood, particularly about the duodenum and in the pelvis.

The mesocolon torn through, and partly away with the colon.

The uterine vessels, broad, and round ligaments, lacerated, as well as the substance of the uterus itself.

After Mr. Brookes had finished his examination, Dr. Hooper requested that he would again inspect the parts, to discover if there was any appearance of putridity, but from their firm and healthy state, nothing of the kind was to be found, nor were there any marks of lacerated intestine in what was left of the vagina.

I also introduced my finger into the uterus, but found nothing in the nature of disease: some placenta only remained, and there was a fissure in it on the right side, near the os uteri, which did not penetrate far into its substance.

From this account of this lamentable case, it appears that the Accoucheur must have violated the first principles of the art, which he has thought proper to practice; 'or to have entirely forgotten the instructions which he must have received from those by whom he was taught; for after the unfortunate result of his attempt to extract the placenta, what ought indispensably to have been done, is not a matter of opinion: no man is at liberty to hesitate or ask himself what method he shall pursue. The imperious circumstances of these cases are such, as to preclude all choice, as they point out, in the strongest manner, the inevitable necessity of prompt and immediate assistance; or the patient but too often dies.

I will just take a view of this practitioner's conduct, and shew what he ought to have done, by shewing what he did not do.

Friday morning he was sent for to his patient, and was told by the nurse, that she had sent for him, not because Mrs. D. was in much pain, but because her waters had broke; with this information he is content, and goes about his business, without further enquiry or examination. What ought he to have done? The answer and the process are both simple and clear; he ought to have made an examination, in order to ascertain the nature of the presentation, and if he found the head, breech, or feet presenting, (as luckily they did) he would have had nothing to do but to afford the common assistance when necessary; but if, on the contrary, instead of either of these parts, an arm or shoulder had presented, he should not have left his patient, but have remained, with a view to avail himself of the earliest opportunity for changing the position of the child, thereby avoiding the necessity, which he must otherwise infallibly be under of doing it afterwards, when the uterus became contracted round its body, and by that means rendering the operation extremely painful, and often dangerous to the mother; and to the child, for the most part, fatal: therefore, whenever the waters break, it is not a matter of opinion, whether we should pass an examination or not, but it is a rule in practice which admits of no deviation.

With respect to the delivery of the child, as one foot presented, he brought down the other, and the child was born with little or no assistance. So far so good.

But now I am coming to that part of his practice which I cannot censure too severely, because it may be attended with the most serious consequences. In some uncertain time, from ten, fifteen, twenty minutes to an hour, the uterine pain returns, and it returns for the purpose of expelling the placenta from its cavity, and it is expelled generally by the uterus embracing the whole of it, and pressing it into the vagina; consequently the cavity of the uterus, which, before this operation,

contained the placenta, now contains nothing but a little coagulated blood; this is also expelled by the same power, and the uterus being empty, contracts, and all possibility of hæmorrhage is thereby done away. But how does this practitioner proceed? Instead of waiting patiently to see what nature would do towards the expulsion of the placenta, he has recourse to art, and endeavours to extract it, without having sufficient reason for so doing. The labour had been so far favourable; the uterus had shewn no disposition to contract; the time was not arrived for it to shew any, and the patient was in all respects as well as women generally are, when no improper interference takes place; therefore, all hitherto was safe, and all might have terminated happily.

But, unfortunately, forgetful of the prina ciples by which he should have been governed, or inattentive to the consequences of his proceedings, he now determines on a line of conduct, directly the reverse of right; and having, in the commencement, left undone what he most decidedly ought to have done, he now does what he as decidedly ought not to have done, that is, he takes his patient out of the hands of safety, and places her in a situation of great danger; and having so done, there he leaves her: for, instead of attempting to avert the mischief he had caused, by having recourse to the unicum remedium, i. e. the immediate delivery of the placenta, he determines to do nothing: and the very reason which he gives for this determination, is exactly the reason

which should have compelled him to the contrary, viz. because his patient was flooding and fainting-I say, should have compelled him to the contrary; for this again is no matter of speculation, opinion, or conjecture, but of decided and imperious necessity. Would not any man, capable of reflecting, have said to himself, my patient is losing blood, and that in such a quantity as to make her faint; this must proceed from something which obstructs the contraction of the uterus, this something must be the placenta; the only mode of removing the hæmorrhage, therefore, is to remove the cause; and this I must do by extracting the placenta from the cavity of the uterus; for, whilst it is there, I know, that by keeping

open, and the hæmorrhage consequently must continue; but when it is emptied, it will naturally contract; the blood vessels will, by that means, be closed, and the hæmorrhage will of course, cease.

This mode of reasoning I should suppose must readily occur to any man who dared to announce himself a practitioner in midwifery! But, instead of going up, and bringing down the lacerated placenta, he suffers it to remain all Friday night, all Saturday, and all Sunday, till four o'clock in the afternoon, when, perhaps, finding his patient nearly exhausted, he made some attempts, as he imagined, to relieve her. What those attempts were, the preceding statement fully shews.

This, my dear Sir, is an account which mere humanity must shrink from with sensations of horror; and vet, dreadful as is the assertion, this is but one amongst many cases, equally disastrous, equally fatal, which are continually, perhaps daily, occurring in this country: indeed; though the circumstances here are marked with peculiar features of outrageous enormity, its consequences were less deplorable than many others which I could state. One life was here most certainly sacrificed; but in how many instances is the premature death of both mother and child brought on by the hand of ignorance; and in how many others, where the woman survives the loss of the child, she survives, as you well know, in a state of such hopeless wretchedness, and lingers. so miserably through her life, rendered by violence and want of skill a daily death, that her escape must be rather a source of sadness than of joy, both to herself and friends. I have, as I have above observed, many cases on record, where women and their offspring have been lost by the presumption, the folly, the ignorance, or the inattention of the persons who professed to assist them; but the majority of them not being sufficiently attested by public evidence, I shall only mention one, and on that one all comment will be unnecessary.

The patient was a fine healthy woman of 22, in her first pregnancy, who, having been in labour from Friday morning till Sunday noon, was then delivered of a dead child. As this, from the descrip-

tion which I received, appeared to have been a case of impaction, every practitioner must know, that an early recourse to the common methods of treatment would have afforded, at least, many chances of preserving the child's life; but of this, as I was not present, I have nothing to say. The woman, as I was informed, had never made a drop of water during the whole period of her labour, nor had any attempt been made to draw it off, either before, or subsequent to her delivery; and some days afterwards, when I was called in, the scene which presented itself was indeed truly deplorable!!

A gangrene had taken place shortly after her delivery, and had committed the most dreadful ravages.—All the ex-

ternal parts, the bladder, the vagina, the perinæum, and the rectum were entirely gone! Not a vestige even of either could be discovered. - She could lie only in two positions, on her back, or on her abdomen; in consequence of which the whole of the regio umbilica, from the pubis upwards, had become one continued surface of ulceration: and if impelled by the excruciating torments which she sustained, to seek, as she vainly hoped, a momentary respite by a change of posture, she begged to be turned on her back, she then laid on the nates, which were in the same ulcerated state. In this situation of irremediable wretchedness and unceasing agony, she lingered nearly six weeks, and then died; worn out by the pain, and exhausted by the discharge,

which suffering nature could no longer support. Dr. Clarke, and Mr. Chevalier, the surgeon, both gentlemen whose talents, and deservedly high professional characters, far outstrip any praise of mine, saw this case with me, and exclaimed, "This is indeed going to an execution!!!"

Is it not astonishing, my dear Sir, that in a country so deservedly famous for humanity and learning as this, where the authority of the Legislature has founded colleges, the business of whose members it is to investigate the talents, and watch over the conduct, of men, to whose care the health of the community is to be intrusted; is it not astonishing, I say, that there should not be some constituted authority, to inves-

tigate the talents, and watch over the conduct, of the men, by whose aid that community is to be born? Physicians are subjected to an examination, as to their abilities; so are surgeons. Learning, therefore, as well as practical knowledge, are indispensable for both; and to the apothecary, an apprenticeship is necessary, to enable him merely to dispense medicaments.

In the practice of physicians and surgeons, though so properly regulated, and judiciously restricted, one case includes one life only, while, with the accoucheur, two, or more, are constantly connected; and yet no attention whatever is paid to investigate, regulate, or restrict practitioners in this part of the profession. No knowledge, no talents, no education,

it seems, are necessary to enable a man to practice midwifery; consequently, when the other branches of science shut the door against ignorance and illiteracy, they seek admittance here: and here they may be justly said to reign paramount, and slay their thousands with impunity!!!

Surely an evil of this magnitude calls loudly for a remedy. If the riches of a state consist in its population, policy alone should influence the Legislature to adopt some means of putting a stop to this shameful depredation on the vitality of its wealth: and as much as two lives are more valuable than one, so much more should the care be, that suffering humanity should have every thing to hope, and nothing to fear, from the hand

which professes to assist at this interesting and critical period.

It appears to me that all operations, which may be necessary in the practice of midwifery, are certainly more connected with Surgery than with Physic. To the members of that College, therefore, I would most strenuously recommend the consideration of this very important concern: knowing many of them, as I do, to be men whose characters do honour to human nature, learned, humane, benevolent, and wise; I conceive that to alleviate the misery and promote the safety of women, when under circumstances of such peculiar helplessness and interest, as well as to insure existence to thousands yet unborn, will be a work well and properly confided to them.

To you, my dear Sir, whose sentiments on this subject so perfectly correspond with mine, and to whom mankind are already so much indebted, I more immediately address myself: a board might be formed of members, selected and appointed to make this branch of the profession their principal care, and no man should be capable of announcing himself a practitioner in midwifery, till duly licensed' by them, by which means, I fully believe, and verily hope, that we should arrest "this foe of mankind in his walk," and intercept " the arrow that flies in darkness."

I have the honour to be,

My dear Sir, your's, &c. &c.

JOHN BOYS.

Mortimer Street, Sept. 30, 1807.

and the significant services of

apage.

POSTSCRIPT.

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October 23, 1807.

Since writing the above, another case has occurred, the outlines of which I shall just mention as an additional proof of what I have before stated.

I was informed that she had been taken in labour, of her first child, on a Sunday evening; a midwife, with whom she had agreed to attend her, was sent for, and she called in a medical gentleman; but he, finding nothing serious in her case, prudently advised time and patience, and then left her: on Monday, however, the next day, about half past nine in the morning, the midwife, be-

coming impatient, applied to another accoucheur, and about twelve at noon she was delivered of a dead child, ope artis.

On my examining her, it appeared that the sphincter ani was gone, leaving the rectum bare; the greater part of the nymphæ, and os externum, were destroyed; the posterior part of the cervix uteri adhered to the rectum; and directly opposite was an opening in the vagina, leading, as I suppose, into the bladder, for she cannot retain a drop of water.

Dr. Fothergill saw this case before I was applied to; and Mr. Chevalier did me the favour to call with me, and himself made an examination: Mr. Travis also, my house pupil, was present when

I was first called in, and assisted in the examination which I made.

Mr. Beard, surgeon, another of my pupils, has likewise seen the case.

THE END.

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